

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

FREEDOMWORKS FOR AMERICA

ADDRESS (number and street) ▼

400 N CAPITOL STREET NW SUITE 765

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20001

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00499020

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

03

01

2016

03

31

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul Kilgore

Signature of Treasurer

Paul Kilgore

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

09

13

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

FREEDOMWORKS FOR AMERICA

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 03 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y 03 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2016		<span style="border: 1px solid black; padding: 2px;">370046.39</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">226555.06</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">2125.00</span>	<span style="border: 1px solid black; padding: 2px;">15432.16</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">228680.06</span>	<span style="border: 1px solid black; padding: 2px;">385478.55</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">47942.96</span>	<span style="border: 1px solid black; padding: 2px;">204741.45</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">180737.10</span>	<span style="border: 1px solid black; padding: 2px;">180737.10</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**FREEDOMWORKS FOR AMERICA**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
03	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y
03	/	31	/	2016

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

510.00

6960.00

(ii) Unitemized .....

1615.00

8472.16

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

2125.00

15432.16

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

2125.00

15432.16

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ►

2125.00

15432.16

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ►

2125.00

15432.16

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	21453.71	161758.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	21453.71	161758.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	26489.25	42927.97
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	55.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	55.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	47942.96	204741.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	47942.96	204741.45

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2125.00	15432.16
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	55.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2125.00	15377.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	21453.71	161758.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	21453.71	161758.48

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 13

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. DAN ARNOLD**

Mailing Address 5 TOWN GARDEN DR  
APT 12

City State Zip Code  
LIVERPOOL NY 13088-8507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARMY

Occupation

SOLDIER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

Transaction ID : SA11AI.4713

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KENNETH BOOTHE**

Mailing Address 1001 E FM 700

City State Zip Code  
BIG SPRING TX 79720-5720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2016

Transaction ID : SA11AI.4692

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MR JAMES ELLER**

Mailing Address 3587 CONRAD AVE

City State Zip Code  
SAN DIEGO CA 92117-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2016

Transaction ID : SA11AI.4690

Amount of Each Receipt this Period

200.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

310.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 13

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. DONNA LUKE**

Mailing Address 29 PEBBLE BROOK DR

City

MIDDLEBORO

State

MA

Zip Code

02346-3444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DONNA LUKE

Occupation

ATTORNEY

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y  
03 / 03 / 2016

Transaction ID : SA11AI.4678

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DR THOMAS RATHMANN**

Mailing Address 339 E GREENS DR

City

BATON ROUGE

State

LA

Zip Code

70810-8951

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CHIROPRACTOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y  
03 / 13 / 2016

Transaction ID : SA11AI.4723

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M = M / D = D / Y = Y - Y - Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

200.00

510.00

<b>X</b>	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

FREEDOMWORKS FOR AMERICA

**A. COMPLIANCE CONSULTING OF VA, LLC**

Date of Disbursement

Three 7-segment displays are shown, each with a different number of segments lit. The first display shows '03' with 4 segments lit. The second display shows '03' with 4 segments lit. The third display shows '2016' with 10 segments lit.

Transaction ID : SB21B.4835

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

9000.00

 Memo Item

**B. FOLEY & LARDNER LLP**

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.4836

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

468.00

Memo Item

### C. JONES DAY

Date of Disbursement

Three digital displays are shown, each with a different segment missing. The first display shows '03' with the top-left segment missing. The second display shows '03' with the top-right segment missing. The third display shows '2016' with the top-left segment missing.

Transaction ID : SB21B.4838

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

11383.97

 Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....

20851.97

**TOTAL** This Period (last page this line number only).....

[illegible]



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. O'CONNOR CONSULTING SERVICES LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Mailing Address 4770 HOWARD PLACE

City	State	Zip Code
CHESAPEAKE BEACH	MD	20732

**Transaction ID : SB21B.4840**Purpose of Disbursement  
ACCOUNTING SERVICES

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

420.25
--------

☐ Memo Item

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

**B. PAYPAL**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Mailing Address 2211 NORTH FIRST ST

City	State	Zip Code
SAN JOSE	CA	95131

**Transaction ID : SB21B.4841**Purpose of Disbursement  
ONLINE PROCESSING FEE

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

60.00
-------

☐ Memo Item

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

**C. PAYPAL**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Mailing Address 2211 NORTH FIRST ST

City	State	Zip Code
SAN JOSE	CA	95131

**Transaction ID : SB21B.4842**Purpose of Disbursement  
ONLINE PROCESSING FEE

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

0.73
------

☐ Memo Item

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

**SUBTOTAL** of Disbursements This Page (optional)..... ►

480.98
--------

**TOTAL** This Period (last page this line number only)..... ►

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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. PAYPAL**

Mailing Address 2211 NORTH FIRST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
ONLINE PROCESSING FEE

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2016

**Transaction ID : SB21B.4843**

Amount of Each Disbursement this Period

4.40
------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAYPAL**

Mailing Address 2211 NORTH FIRST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
ONLINE PROCESSING FEE

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2016

**Transaction ID : SB21B.4844**

Amount of Each Disbursement this Period

34.25
-------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAYPAL**

Mailing Address 2211 NORTH FIRST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
ONLINE PROCESSING FEE

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2016

**Transaction ID : SB21B.4845**

Amount of Each Disbursement this Period

18.36
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.01
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. PAYPAL**

Mailing Address 2211 NORTH FIRST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
ONLINE PROCESSING FEE

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		17		2016

**Transaction ID : SB21B.4847**

Amount of Each Disbursement this Period

4.15
------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAYPAL**

Mailing Address 2211 NORTH FIRST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
ONLINE PROCESSING FEE

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2016

**Transaction ID : SB21B.4861**

Amount of Each Disbursement this Period

39.21
-------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAYPAL**

Mailing Address 2211 NORTH FIRST ST

City	State	Zip Code
SAN JOSE	CA	95131

Purpose of Disbursement  
ONLINE PROCESSING FEE

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

**Transaction ID : SB21B.4862**

Amount of Each Disbursement this Period

5.60
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

48.96

21438.92

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 12 OF 13  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00499020	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="border: 1px solid black; padding: 2px;">             M M M / D D D / Y Y Y Y Y Y              . . . / . . . / . . . . . .           </div>	

Full Name of Payee <b>DEL CIELO MEDIA LLC</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y              03 / 11 / 2016           </div>	
Mailing Address 1427 LESLIE AVE SUITE 102				Amount <div style="border: 1px solid black; padding: 2px;">             . . . . . 14243.00           </div>	
City ALEXANDRIA	State VA	Zip Code 22301		Transaction ID : <b>SE.4855</b>	
Purpose of Expenditure MEDIA PLACEMENT/PRODUCTION		Category/Type		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y              03 / 10 / 2016           </div>	
Name of Federal Candidate MIKE LEE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px;">             . . . . . 26389.25           </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Convention	

Full Name of Payee <b>TARGETED CREATIVE COMMUNICATIONS INC</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y              03 / 13 / 2016           </div>	
Mailing Address 106 S COLUMBUS ST				Amount <div style="border: 1px solid black; padding: 2px;">             . . . . . 100.00           </div>	
City ALEXANDRIA	State VA	Zip Code 22314		Transaction ID : <b>SE.4853</b>	
Purpose of Expenditure MEDIA PLACEMENT/PRODUCTION		Category/Type		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y              03 / 11 / 2016           </div>	
Name of Federal Candidate MIKE LEE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px;">             . . . . . 26489.25           </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Convention	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">             . . . . . 14343.00           </div>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px;">             . . . . .           </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">             . . . . .           </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Paul Kilgore

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 13 OF 13  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00499020	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>M M M</span> <span>D D D</span> <span>Y Y Y Y Y Y</span> </div> </div>	

Full Name of Payee <b>UTAH MEDIA GROUP</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M 03</div> <div style="border: 1px solid black; padding: 2px;">D D D 13</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y 2016</div> </div>	
Mailing Address <b>4770 S 5600 W</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12146.25</div>	
City <b>WEST VALLEY</b>	State <b>UT</b>	Zip Code <b>84118</b>	Transaction ID : <b>SE.4851</b>		
Purpose of Expenditure <b>MEDIA PLACEMENT/PRODUCTION</b>		Category/Type	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M 03</div> <div style="border: 1px solid black; padding: 2px;">D D D 09</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y 2016</div> </div>		
Name of Federal Candidate <b>MIKE LEE</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>UT</b>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">12146.25</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Convention</b>	

Full Name of Payee		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination	
Mailing Address				Amount	
City	State	Zip Code	Date of Disbursement or Obligation		
Purpose of Expenditure	Category/Type	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>			
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	12146.25
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	26489.25

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Paul Kilgore

[Electronically Filed]

Date

M M M  
09

D D D  
13

Y Y Y Y Y Y  
2016

Signature